BLM Montana					
Fieldwork Authorization Request/Notification of Records Search Completion					
Permit Number: Permit Expiration Date: Name: Address	ır mail.	Telephone # FAX # E-mail address: Person in charge: Field Personnel: Date CRIS/CRABS file search completed: Dates of fieldwork: Nature of work: inventory testing monitoring			
Project Name/Number Locat		ion	(Client	
I have reviewed the State CRIS and CRABS records search data for the proposed project locations listed above:					
Responsible Cultural Resource Use Perm	nittee	Date			